

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HC		6-12-01
O.I.P.E. CLASSIFIER	W		6-22-01
FORMALITY REVIEW	A.T	1071	08/21/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	05/29/03
2	✓
3	0
4	✓
5	✓
6	0
7	✓
8	0
9	0
10	✓
11	0
12	0
13	0
14	0
15	0
16	0
17	✓
18	0
19	0
20	0
21	✓
22	✓
23	0
24	0
25	0
26	0
27	0
28	0
29	0
30	0
31	0
32	0
33	0
34	0
35	0
36	✓
37	0
38	0
39	✓
40	✓
41	✓
42	0
43	✓
44	0
45	0
46	0
47	✓
48	✓
49	✓
50	0

Claim	Date
Final Original	
51	0
52	0
53	✓
54	✓
55	✓
56	0
57	0
58	0
59	0
60	0
61	0
62	0
63	0
64	0
65	0
66	0
67	0
68	0
69	0
70	0
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94	0
95	0
96	0
97	0
98	0
99	0
100	0

Claim	Date
Final Original	
101	0
102	0
103	0
104	0
105	0
106	0
107	0
108	0
109	0
110	0
111	0
112	0
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140	0
141	0
142	0
143	0
144	0
145	0
146	0
147	0
148	0
149	0
150	0

If more than 150 claims or 10 actions  
 staple additional sheet here

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